Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

Form T-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Cartification of Compliance with the Kansas Surface Owner Notification Act,

Form KSONA-1, Carime and of Completion of MUST be submitted	led with this form.
neck Applicable Boxes:	Effective Date of Transfer: 7/1/2013
Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 219733
Gas Lease: No. of Gas Wells	Lease Name: W B CRAWFORD
Gas Gathering System:	Lease Name:
Saltwater Disposal Well - Permit No.:	SE sec. 29 Twp. 33 R. 37W [EX]W
Spot Location: feet from N / S Line	Legal Description of Lease:
feet from	T033S - R037W: SEC 029 All
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	
Number of Injection Wells	County: Stevens
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. II Drill Pit, WO or Haul)	feet from N / S Line of Section feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover D C Drilling
	Contact Person: LAURIE KILBRIDE KANSAS CORPORATION COMMISSIO
Past Operator's License No	740 404 4400
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 JUN 1 8 2013
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 CONSERVATION DIVISION
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cale WICHITA KS
New Operator's License No. 32864	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
	Oil / Gas Purchaser: ONEOK FIELD SERVICES
210 PARK AVENUE, SUITE 2350	05/24/2042
OKLAHOMA CITY, OK 73102	Uale:
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	on Commission. This acknowledgment of transper perturbs to realisate components.
is acknowledged as	
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	
	-
Date: Authorized Signature / /	Date: Authorized Signature
2/24/2	PRODUCTION 7.29.13 UIC 7-29-13
DISTRICT	District
Mail to: Past Operator	

Side Two

Must Be Flied For All Wells

KDOR Lease			* Location: 29	33 37WSE	
Lease Name	W B CRAWFORD		Location: 20	300,110	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	am caima i indi:	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
24 INF	15189217600000 /	//08 1250FSL	GPS L	c. Dist. 1 K	Sullivan 8/24/12
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	_	FSL/FNL	FEL/FWL		
	_	FSL/FNU	FEL/FWL		
		FSL/FNI	FEL/FWL		
		FSL/FNI	FEL/FWL		
		FSL/FN	FEL/FWL		
		FSL/FN	LFEL/FWL		
		FSL/FN	LFEL/FWL		
		FSL/FN	L FEL/FWL		
		FSL/FN	LFEL/FWL		
		FSL/FN	ILFEL/FWI		
		FSL/FN	LFEL/FWI		RECEIVED
		FSL/FN	IL FEL/FWI		KANSAS CORPORATION COMMISSIO
		FSL/FN	ILFEL/FWI		JUN 1 8 2013
		FSL/FN	IL FEL/FW	L	CONSERVATION DIVISION WICHITA, KS

A separate sheet may be attached if necessary

[&]quot;When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent);
T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.

5208	Well Location:
PERATOR: License # 5208 EXXONMOBIL OIL CORPORATION	
me: EXXONMOBIL OIL CON CIGATION dress 1: P. O. BOX 4358	County: Stevens
dress 1:	Lease Name: W B CRAWFORD Well #: 2-4 INF
v: HOUSTON State: TX Zip:	77210 + 4358 If filling a Form T-1 for multiple wells on a lease, enter the legal description of
intact Person: ADAM SCOTT ione: (T033S - R037W: SEC 029 All
one: (1
urlace Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional
nme: See Attached	sheet listing all of the information to the left for each state of the register of deeds for the owner information can be found in the records of the register of deeds for the owner information selected property are nearly at the county treasurer.
ddress 2: State: Zip	
	Riors of least on the Form C 1 plat Form CR-1 plat or a separate plat may be submitted.
re preliminary non-binding estimates. The io	1 (Intent) or CB-1 (Cathodic Protection Borenole Intent), you must supply the locations shown on the plat ations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat cations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
is preliminary non-binding estimates. The loss is lefect one of the following: X I certify that, pursuant to the Kansas owner(s) of the land upon which the	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
ire preliminary non-binding estimates. The losselect one of the following: X I certify that, pursuant to the Kansas owner(s) of the land upon which the CP-1 that I am filing in connection with form; and 3) my operator name, address.	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface
ire preliminary non-binding estimates. The losselect one of the following:	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this less, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the formation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form, the KSONA-1
ielect one of the following: Certify that, pursuant to the Kansas owner(s) of the land upon which the CP-1 that I am filing in connection will form; and 3) my operator name, address	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this less, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the formation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. The strip of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form T-1, or Form CP-1 will be returned.
elect one of the following: Certify that, pursuant to the Kansas owner(s) of the land upon which the CP-1 that I am filling in connection will form; and 3) my operator name, address	Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this less, phone number, fax, and email address. The surface owner(s). I acknowledge that, because I have not provided this information, the formation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form. Sent of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 in Form T-1, or Form CP-1 will be returned. The Regional Land Manager

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

City:

W B CRAWFORD Lease Name: AP#: 15189217600000 Owner Name: JOHNSON, J V REV TR Address: 340 N RIVERSIDE AVE Zip: 92376-5926 State: CA City: RIALTO Owner Name: Address: Zip: State: City: Owner Name: Address: Zip: State: City: **Owner Name:** Address: State: Zip: City: Owner Name: Address:

State:

Zip:

RECEIVED

KANSAS CORPORATION COMMISSION

Well#: 2-41NF

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS